Fees: (all temporary permits are valid for 90 days)

() Non-profit food and samplers

() For profit vendors



2500 N. Fort Valley Road, Building 1 Flagstaff, Arizona 86001 TEL 928.226.2710 FAX 928.226.2711

\$65.00

\$95.00

\$150.00

## **Application for a Temporary Food Service License**

Applications must be received by Environmental Health a **minimum of TEN (10) days prior to the event**. Late applications will be assessed a penalty fee (see below). You may apply for more than one event at a time; *fill out one application for each event*.

() For profit food at non-profit event; vendors that sell non-phf's (lemonade, etc.)

() Penalty fee	e for applicat	ion received	less than 10 days before the evat the event	vent	\$50.00 \$50.00
PLEASE PRI	NT CLEAR	LY:			
Applicant's N	lame & Busi	ness Name:	City:	Ctata	
Dhone number	rs (wa will a	all non place	City: se provide phone(s) numbers w	State:	ZIp:
Phone numbe	ers (we will co	<i>an you</i> , piea	se provide phone(s) numbers w	here you can be	reached):
Fvent:					
Location(s):					
				Time:	
Date & Time of Event: Set-up Time: Organizer of Event: Phone Number:					
Menu Review	w: Please list	ALL menu	items, including ingredients us	ed, drinks and co	ondiments.
			e the back of this sheet or an ac		
11 40010101141	pace is need	ou prouse us		<b>201010110</b> 1	pp.
Food Item	Off-site prep Yes or No	On-site prep Yes or No	Preparation (i.e. wash, cut, refrig, grill, servel	n procedures be specific & incl. pre	ep of non-phf's)

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## Plan Review: Complete or describe the following:

1. Construction of booth: Mobile Uni	It [ ] I ent [ ] (tents only allowed for certain foods, refer to Temp F.S. Requirem'ts)
2. Attach pictures or a drawing of "bo	ooth set-up" inside and out (include hand wash station, dishwashing station, etc.).
3. Number of Certified Food Handler	s:*MUST ATTACH COPIES OF CERTIFICATION
4. Name and Phone # of "Person-in-C	Charge" at booth during event:
5. Location of any "Advanced Prepar	ration Site(s):
***Attach a compl	leted commissary agreement with application***
	re not allowed for storage of PHF's or raw meats)
8. Where will produce be washed?	Will meats/foods be thawed? Yes [] No []
9. How long will food be in transport	to the event?
10. How will food be kept hot/cold di	
*	ermometer(s) is available (range 0 – 220 F). Yes [] No []
· · · · · · · · · · · · · · · · · · ·	sanitizer: Chlorine/Bleach [ ] Quaternary Ammonium [ ] Iodine [ ]
13. Test strips to monitor chemical sa	
*	I sink [], Gravity Flow [], Dispensed soap/paper towels []
15. Dishwashing Facilities: 3-bin sink	
16. Where will water for the operatio	
17. Waste water disposal: Sewer [], S	
18. Covered Garbage Cans: Yes [] N	
19. Where will food be stored during	the evening hours when the booth is unoccupied?
contingent upon satisfactory compliance w the permit fee is non-refundable.	th Authority and acknowledge that issuance and retention of this permit is ith the <b>Temporary Food Service Requirements</b> . I also understand that
Applicant's Signature:	Date:
Official Use Only	
Reviewed by:	Date:
[] Approved [] I	Denied *Attach plan review sheet
revised by meg 8/16/06	